

JULY 11/10
2001
U.S. PTOPlease type a plus sign (+) inside this box → Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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UTILITY
PATENT APPLICATION
TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.

First Inventor Jeffrey Fulbright

Title "Trai Mix Tenders"

Express Mail Label No. ET399908619US

JULY 11/10
2001
U.S. PTO
09/902860JULY 11/10
2001

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)

2. Applicant claims small entity status.
See 37 CFR 1.27

3. Specification [Total Pages 5]
(preferred arrangement set forth below)

- Descriptive title of the invention
- Cross Reference to Related Applications
- Statement Regarding Fed sponsored R & D
- Reference to sequence listing, a table, or a computer program listing appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

4. Drawing(s) (35 U.S.C. 113) [Total Sheets 6]

5. Oath or Declaration [Total Pages]

a. Newly executed (original or copy)
Copy from a prior application (37 CFR 1.63 (d))
(for continuation/divisional with Box 18 completed)

b. DELETION OF INVENTOR(S)
Signed statement: attached deleting inventor(s)
named in the prior application. See 37 CFR
1.63(d)(2) and 1.33(b)

6. Application Data Sheet. See 37 CFR 1.76

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

7. CD-ROM or CD-R in duplicate, large table or
Computer Program (Appendix)

8. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)

a. Computer Readable Form (CRF)

b. Specification Sequence Listing on:

- i. CD-ROM or CD-R (2 copies); or
- ii. paper

c. Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. Assignment Papers (cover sheet & document(s))

10. 37 CFR 3.73(b) Statement Power of
(when there is an assignee) Attorney

11. English Translation Document (if applicable)

12. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS
Citations

13. Preliminary Amendment

14. Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)

15. Certified Copy of Priority Document(s)
(if foreign priority is claimed)

16. Nonpublication Request under 35 U.S.C. 122
(b)(2)(B)(i). Applicant must attach form PTO/SB/35
or its equivalent.

17. Other. fee transmittal form

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76

 Continuation Divisional Continuation-In-Part (CIP)

of prior application No. _____, J. _____

Prior application information.

Examiner: _____

Group Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

| | | | | |
|--|---|-----------|-----------------------------------|---|
| <input type="checkbox"/> Customer Number or Bar Code Label |  | | | or <input checked="" type="checkbox"/> Correspondence address below |
| Name | Jeffrey Michael Fulbright | | | |
| Address | 667 Bowen St. | | | |
| City | Oshkosh | State | WI | Zip Code 54902 |
| Country | USA | Telephone | (920) 232-7349 | Fax same |
| Name (Print/Type) | Jeffrey Fulbright | | Registration No. (Attorney/Agent) | |
| Signature |  | | Date | 7/11/01 |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

PTO/SB/17 (11-00)

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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 355.00)

Complete if Known

| | |
|----------------------|-------------------|
| Application Number | |
| Filing Date | 7/11/01 |
| First Named Inventor | Jeffrey Fulbright |
| Examiner Name | |
| Group Art Unit | |
| Attorney Docket No. | |

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to

| | |
|------------------------|--|
| Deposit Account Number | |
| Deposit Account Name | |

Charge Any Additional Fee Required
Under 37 CFR 1.16 and 1.17

Applicant claims small entity status
See 37 CFR 1.27

2. Payment Enclosed:

Check Credit card Money Order Other

FEE CALCULATION (continued)

3. ADDITIONAL FEES

| Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description | Fee Paid |
|-------------------------------|-------------------------------|---|----------|
| 105 | 130 | 205 65 Surcharge - late filing fee or oath | |
| 127 | 50 | 227 25 Surcharge - late provisional filing fee or cover sheet | |
| 138 | 130 | 139 130 Non-English specification | |
| 147 | 2,520 | 147 2,620 For filing a request for ex parte reexamination | |
| 112 | 820* | 112 920* Requesting publication of SIR prior to Examiner action | |
| 113 | 1,840* | 113 1,840 Requesting publication of SIR after Examiner action | |
| 115 | 110 | 215 55 Extension for reply within first month | |
| 116 | 390 | 216 195 Extension for reply within second month | |
| 117 | 890 | 217 445 Extension for reply within third month | |
| 118 | 1,300 | 218 695 Extension for reply within fourth month | |
| 126 | 1,880 | 228 945 Extension for reply within fifth month | |
| 119 | 310 | 218 155 Notice of Appeal | |
| 120 | 310 | 220 195 Filing a brief in support of an appeal | |
| 121 | 270 | 221 135 Request for oral hearing | |
| 138 | 1,510 | 138 1,510 Petition to institute a public use proceeding | |
| 140 | 110 | 240 55 Petition to revive - unavoidable | |
| 141 | 1,240 | 241 620 Petition to revive - unintentional | |
| 142 | 1,240 | 242 620 Utility issue fee (or reissue) | |
| 143 | 440 | 243 220 Design issue fee | |
| 144 | 600 | 244 300 Plant issue fee | |
| 122 | 130 | 122 130 Petitions to the Commissioner | |
| 123 | 50 | 123 50 Processing fee under 37 CFR 1.17(g) | |
| 126 | 180 | 126 180 Submission of Information Disclosure Stmt | |
| 581 | 40 | 581 40 Recording each patent assignment per property (times number of properties) | |
| 146 | 710 | 248 355 Filing a submission after final rejection (37 CFR § 1.129(a)) | |
| 149 | 710 | 249 555 For each additional invention to be examined (37 CFR § 1.129(b)) | |
| 179 | 710 | 279 355 Request for Continued Examination (RCE) | |
| 169 | 900 | 168 900 Request for expedited examination of a design application | |
| Other fee (specify) _____ | | | |

SUBTOTAL (1) (\$ 355)

2. EXTRA CLAIM FEES

| | | | | |
|--------------------|---------|---|---|----------|
| Total Claims | -20** = | X | = | Fee Paid |
| Independent Claims | - 3** = | X | = | |
| Multiple Dependent | | | | |

| | | | |
|-------------------------------|-------------------------------|--|--|
| Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description | |
| 103 | 18 | 203 9 Claims in excess of 20 | |
| 102 | 80 | 202 40 Independent claims in excess of 3 | |
| 104 | 270 | 204 135 Multiple dependent claim if not paid | |
| 109 | 80 | 209 40 ** Reissue independent claims over original patent | |
| 110 | 18 | 210 9 ** Reissue claims in excess of 20 and over original patent | |

SUBTOTAL (2) (\$)

**Or number previously paid, if greater. For Reissues, see above

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

SUBMITTED BY

| | | | |
|-------------------|---|-------------------------------------|------------------------|
| Name (Print/Type) | Jeffrey Fulbright | Registration No. (Attomey/Agent) | Telephone 920-232-7349 |
| Signature |  | | |
| | | Date | 7-11-01 |

Complete if applicable

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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